

Today our country is at war and once again many brave people have gone off to fight in defense of freedom. They are truly the wings of the butterfly. Just as I picked up Bailey and placed her safely on my lap the troops fighting now, and the troops that have fought for us in the past picked up America, and started to fly. In order to start us swinging I had to push hard off the rocky ground. The American soldiers don't have an easy task ahead of them. We are just now, just kicking off of the rocky ground. But I have no doubt that we will fly. A butterfly has two wings. Each equally important. The soldiers will no doubt put 110% into flying our country to the freedom of the open skies. But we the American people must put equally as much effort into flying the country higher. All of us as a team must reach out to America's future. Without knowing us people have laid down their lives so that we would be able to enjoy the freedoms that are now being threatened. America too has a dream stone. Only it comes in a different form. It is tri-colored in red, white, and blue. Red for the blood shed yesterday, White for the pure freedoms we enjoy today and Blue for the endless clear skies of tomorrow.

Our flag is our dream stone holding inside of it the very hopes and dreams of our Nation. We held tightly to it as it was proudly carried through World War One, World War Two, Desert Storm, Vietnam and Korea. While we were enjoying a time of great prosperity we tucked our stone away in our pocket. On September 11th we pulled it out of our pockets when firefighters proudly raised it high at ground zero, athletes displayed it on their jerseys, and average Americans flew it from their cars and homes. My generation knows how to dream. Will the generation after us be able to say the same? We must reach out and place the knowledge of the past into the hands of the future. When we empower the future generations with knowledge our country is sure to thrive. It is estimated that over one million men and women have died in service to our great country. Let us, America's present, take pride in our history and reach out to the future by passing along our knowledge and our great American dream stone. Because without a doubt America's future is whatever America dreams it to be.

#### PERSONAL EXPLANATION

##### HON. BOB RILEY

OF ALABAMA

IN THE HOUSE OF REPRESENTATIVES

*Monday, July 15, 2002*

Mr. RILEY. Mr. Speaker, I was unavoidably detained for Rollcall No. 295, on H.R. 4687, the National Construction Safety Team Act. Had I been present, I would have voted "yea."

#### THE UNINSURED

##### HON. JOHN CONYERS, JR.

OF MICHIGAN

IN THE HOUSE OF REPRESENTATIVES

*Monday, July 15, 2002*

Mr. CONYERS. Mr. Speaker, last week, on July 11, 2002, several of my colleagues, Ms. BALDWIN, Ms. LEE, Mr. McDERMOTT, and Ms. CARSON, declared that it was time for this Congress to place universal health care at the top of the nation's political agenda. This declaration, I believe, was a defining moment for the universal health care movement in Amer-

ica. Not since 1994 have we seen such a visible and strong nationwide movement for universal health care.

Two years ago, in an attempt to create momentum and a unified strategy to achieve universal health care in Congress, I founded, along with Members of the Congressional Black Caucus, the Progressive Caucus, the Hispanic Caucus, and the Asian Pacific American Caucus, the "Congressional Universal Health Care Task Force," which now has 44 Members. For over two years we have sponsored briefings on Capitol Hill, attended town meetings on universal health care in cities across the country, and learned from health care experts about different ways to achieve universal health care.

Mr. Speaker, I introduced House Concurrent Resolution 99 with several of my colleagues from the "Congressional Universal Health Care Task Force," in order to build the momentum for passage of universal health care legislation by 2004.

We currently have 86 co-sponsors for this bill. There are over 325 national, state, and local organizations who support it as well. House Concurrent Resolution 99 does not specify how to pay for universal health care, nor does it spell out how a health care for all system would be administered. Instead, the resolution explicitly states what universal health care should be—affordable, comprehensive, and accessible for all Americans.

America is on the road to universal health care. How can we as members of Congress justify the fact that we have one of the best health insurance plans available, yet we allow 40 million Americans to have no health insurance coverage at all? Mr. Speaker, we cannot defend something that is clearly indefensible.

In the world's wealthiest country, my colleagues somehow can sleep at night knowing that right now in America, there are millions of patients, many of the children and families, that are having serious heart problems, lung problems, headaches, dental problems, mental illness, or other maladies, but are delaying treatment, not because they do not care about their health, but because the system does not care about them.

We now know empirically, based on the recent Institute of Medicine's 2002 report on the uninsured, that 18,000 Americans die each year because they were uninsured. If we truly care about the health and well being of working families, and those with serious illnesses who are too sick to work, we would ensure that all Americans would have peace of mind, as they do in Europe and Canada, to accessible, affordable, high quality, and comprehensive health care for all guaranteed by law.

In Michigan, thousands of uninsured HIV/AIDS patients can not afford the necessary cocktail of life sustaining drugs due to budget cut backs of government subsidized HIV/AIDS prescription drug programs. Can we continue to allow the uninsured chronically ill, those who have serious physical or mental health problems to go without needed health care for long periods of time, jeopardizing their lives, and needlessly suffering due to having untreated illnesses? For Congress to ignore these health care injustices and continue to "wish our health crisis away" is both immoral and cold hearted.

Plain and simple, if you do not have health insurance, you will receive "second class medicine," as Consumer Reports magazine

highlighted in an in depth story published last year. This is particularly true if you are African American or Hispanic. Might I remind you that the first question a nurse or hospital intake administrator asks the patient is not, "May I help you," but rather, "Do you have health insurance?" Health care in America for the most part is a business, and therefore, health care providers and physicians that are making money do not have an incentive to provide charity care.

The Kaiser Family Foundation recently reported that the majority of the uninsured do not receive comprehensive charity care in hospital emergency rooms or community clinics. Because there is no such thing as "universal charity care" in this country, we need universal health care and we need it now. Most uninsured patients with serious illnesses need long term health care treatment, prescription drugs, or medical equipment. Currently, millions of uninsured chronically ill patients must suffer the indignities of spending days and weeks searching for charity care. They often borrow money from relatives or friends just to purchase prescription drugs or to see a doctor. This is wrong and we all know it.

For the past two years, the "Congressional Universal Health Care Task Force" has sponsored several briefings with my colleagues from the Congressional Black Caucus, Progressive Caucus, Hispanic Caucuses, and the Asian Pacific American Caucus on the uninsured crisis in America. We have heard story after story of untold suffering by uninsured or under-insured Americans. We have also heard from numerous physicians who saw patients after their illness were full blown, many of them who died, because they delayed treatment only because they were uninsured. I urge Members of Congress to read "As Sick As it Gets," by Rudolph Mueller, M.D., a ground breaking book about the shocking reality of America's healthcare system. The book documents case after case of Dr. Mueller's patients who tragically became chronically ill, or died, as a result of delaying health care only because they were uninsured.

The Task Force has heard from numerous Americans whose credit was ruined for life, and went into bankruptcy due to thousands of dollars of unpaid medical bills. There are approximately 200,000 bankruptcies in America each year due to unpaid medical bills. Individuals and families should not have to experience the pain and humiliation of declaring bankruptcy just because they got sick. I heard testimony last year from two Washington D.C. residents, a husband and wife with cancer, both high school teachers, who declared bankruptcy due to the high costs of chemotherapy. They were both insured at the time, but had to rely on their credit cards to cover the costs of treatment, due to inadequate private health insurance coverage. Their daughter, who has Hepatitis C, called dozens of doctors but was denied access because she was uninsured. She is having a difficult time returning to work, because she needs long term therapy and treatment in order to be productive again. This is a national disgrace.

Mr. Speaker, I do not believe, unlike many of my colleagues, that universal health care means the federal government provides vouchers so Americans can purchase costly and inferior or private health insurance, that in most cases, will not adequately cover one's health care needs, especially if an individual

or family has a chronic illness. Universal health care is not a system where health decisions are made by HMO bureaucrats instead of physicians. Furthermore, it is not a system where the patient receives some kind of health insurance coverage through an HMO or a private health insurance plan, but does not have the freedom to choose their physician.

It is my hope that we will achieve universal health care one day by extending, strengthening, and expanding Medicare to all Americans. Medicare has a 2–3 percent administrative overhead, versus the 20–30 percent administrative overhead costs of an HMO or private health insurance plan. The CBO in 1991 reported that we would save \$ 100 billion dollars a year if we established a public health insurance program for all Americans. Many health care economists contend that a tax payer financed national health insurance program would cost the average family of three a total of \$739 dollars a year for all of their health care costs, as opposed to the thousands of dollars needlessly wasted on premiums, co-pays, and high deductibles of a private health insurance plan. If we continue to support the idea that health care must be run like a business, and we continue to worship at the altar of private health insurance, it will be difficult if not impossible to cover the skyrocketing costs of primary care, prescription drugs, mental health services, and long term care through a private health insurance dominated system.

National health insurance would save billions of dollars through reduced emergency room visits, reduced chronic illnesses, and a dramatic reduction in uncompensated care for public hospitals which treat the uninsured after they have developed full blown chronic illnesses. Prevention is the key here. All Americans would have access to affordable primary care, and therefore, illnesses such as hypertension, cancer, heart conditions, pre-natal health conditions, respiratory, or kidney problems would be dramatically reduced due to having access to regularly scheduled check-ups.

Mr. Speaker, every sector of the American public is calling for health care coverage for all. Citizens, business, labor, the faith community, civil rights organizations, community clinics, public hospitals, the media, physicians, state and local officials; all are calling for health care for all. The time has come for Congress to act on the crisis of the uninsured. Let's join the rest of the industrialized West, and ensure that all Americans receive high quality and affordable health care.

I urge my colleagues to co-sponsor House Concurrent Resolution 99. Let's show the American people that we truly care about their health. We can not allow another 18,000 Americans to die next year because they are uninsured.

#### DEATH OF DHIRUBHAI AMBANI

#### HON. JIM McDERMOTT

OF WASHINGTON

IN THE HOUSE OF REPRESENTATIVES

*Monday, July 15, 2002*

Mr. McDERMOTT. Mr. Speaker, as the current Co-Chairman of the Congressional Caucus on India and Indian American, I note with great sadness the recent death of Dhirubhai

Ambani, the founder of The Reliance Group, India's largest and most profitable company.

Dhirubhai Ambani began his illustrious business career as a small trader of fabrics in rural Gujarat. Over the next half decade, he transformed his small business into a diverse economic powerhouse which included vibrant businesses in petrochemicals, petroleum, polyesters, telecommunications, securities and cutting edge technologies. Unlike many older Indian businesses, however, Reliance chose a new path on its ascendancy to becoming a Fortune World 500 Company, and Dhirubhai Ambani was the architect of Reliance's success. Dhirubhai Ambani chose not to keep his businesses as a family concern. Instead, he floated equity shares and thereby allowed millions of middle-class Indians to join with him in enjoying Reliance's decades of economic success. Indeed, there are now more than three million investors in India's largest and most widely held company, which is also the largest exporter from India, as well as the largest private sector source of revenue to the Indian government.

Mr. Speaker, Dhirubhai Ambani was a legend in India. He was also a role model for entrepreneurs around the world, as well as having served as a shining example of India's economic potential. I am confident that all of the Members of the India Caucus join with me in expressing our sympathy to the entire Ambani family. In particular, we send our heartfelt condolences to his widow, Kokilaben Ambani, and her two sons, Mukesh and Anil, who have assumed the helm of India's largest economic vessel. Dhirubhai Ambani's legacy is large, but his sons will continue to build on their father's many achievements.

#### IN SUPPORT OF H.R. 4687, NATIONAL CONSTRUCTION SAFETY TEAM ACT

SPEECH OF

#### HON. JOSEPH CROWLEY

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

*Friday, July 12, 2002*

Mr. CROWLEY. Mr. Speaker, I rise in support of H.R. 4687, the National Construction Safety Team Act. And I especially want to recognize my friend from New York, Anthony Weiner for his work on the bill.

As we all know, September 11th changed New York. It changed our world. Since September 11th, brave workers, volunteers, and scientific experts have traveled to Ground Zero in the name of recovery and understanding.

These workers, volunteers, and experts have all pushed themselves and their skills to the ultimate limit to deal with an unusually grave situation. And I commend them all.

In particular, the National Institute of Standards and Technology, NIST, had to deftly work with a myriad of concerned New Yorkers. There are thousands of affected family members who are both grieving and seeking answers. People like John and Kathy Ashton of Woodside, Sally Regenhard of Co-op City, and Arthur Taub of Co-op City. Some, like Mr. Taub, had concerns about the NIST investigation itself.

NIST has worked with constituents who wanted answers—and with constituents who had information.

Even seasoned NIST employees admitted they were covering new ground as no one could ever imagine such an event as 9/11 happening.

In the immediate aftermath of September 11th, NIST had to try to do its job amidst emergency respondents, police officers, and incomprehensible loss.

In this extraordinarily challenging situation, critical evidence—like beams, steel work, and cables—was being carted off before the NIST team had a chance to even catalogue or identify it.

Given the fact that the scope of this tragedy had never been seen before, it is understandable that the investigation would be less than ideal.

But it is important that we learn from this tragedy.

And there are several lessons to be learned from September 11th. One lesson is the importance of a swift and thorough investigation of a building failure.

NIST's response teams must have access to building debris as soon as it's safe to enter a site.

And they must be able to move and preserve this critical evidence. This bill gives NIST that authority.

Looking toward the future, it is important to do all we can to prevent a building failure of any kind from ever happening. This bill will allow us to obtain information to help prevent building failures.

And it is important for us to swiftly and thoroughly respond to the community when building failures, God forbid, happen. And this bill does that also.

I urge your support of H.R. 4687.

#### IN RECOGNITION OF JOSE L. LASTRA

#### HON. E. CLAY SHAW, JR.

OF FLORIDA

IN THE HOUSE OF REPRESENTATIVES

*Monday, July 15, 2002*

Mr. SHAW. Mr. Speaker, I rise today to pay tribute to Jose L. Lastra, a man who has served with distinction in the Social Security Administration in South Florida for 30 years.

Born in Cardenas, Cuba in 1948, Jose Lastra arrived in the United States on September 28th, 1961, speaking no English and carrying with him nothing but a strong work ethic and determination. Graduating from Miami Edison High School in 1966, Jose continued his education, earning a degree in History with a minor in Political Science from Florida Atlantic University, with post-graduate studies at the University of Miami School of Hispanic American Studies and Florida International University's School of Public Administration.

Mr. Lastra entered public service on July 17, 1972, when he was hired for the position of Service Representative in the Miami Beach Social Security Office. This month marks his 30th anniversary with the Social Security Administration. Over the last three decades, Jose has served with distinction in a number of positions in the South Florida Area, including: service, claims and field representative, Hispanic Program Officer, and manager of the Cuban-Haitian Emergency Processing Office and the Riverside Branch Office. In recognition